



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Marcia Allina, Treasurer  
New York State Democratic  
Committee  
30 East 29th Street, Suite 300  
New York, NY 10016

FEB 26 1997

Identification Number: C00143230

Reference: 12 Day Pre-General Report (10/1/96-10/16/96)

Dear Ms. Allina:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Your calculations for Line 31, Columns A and B appear to be incorrect. FEC calculations disclose this amount(s) to be \$115,774.88 and \$446,787.40, respectively. Please provide the corrected total(s) on the Detailed Summary Page.

-Your report discloses receipts totalling \$54,226.29 from Democratic State Party Victory Fund and DNC - Birthday Fund, which is a joint fundraising committee affiliated with your committee. Please be advised that a memo Schedule A must be provided to itemize your committee's share of the gross contributions received through the joint fundraiser. The memo schedule should itemize each individual who has contributed an aggregate in excess of \$200 during the calendar year, and provide the amount of unitemized contributions received. In addition, the memo schedule should itemize your committee's share of all contributions from political committees, regardless of amount. 11 CFR §102.17(c)(8)(i)(B)

-You must make an attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

NEW YORK STATE DEMOCRATIC COMMITTEE  
PAGE 2

A committee may demonstrate "best efforts" to obtain the required information by providing the Commission with a description of its procedures for requesting the information and may also supply a copy of a solicitation: the committee must request the contributor information in initial solicitations; make follow-up requests (if necessary); report the information; and file amendments to disclose previously unreported information. Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make an additional written or oral request for the information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing. Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle. Furthermore, if a committee receives contributor information after the contributions have been reported, it must submit, with its next report, an amended memo Schedule A listing all the contributions for which additional information was received or file, on or before the next reporting date, amendments to the previous reports on which the contributions were originally disclosed. See 11 CFR §104.3(a)(4)(i) and 11 CFR §104.7.

-You have received contributions from numerous entities, which appear to be unincorporated proprietorships or partnerships. Generally, these types of contributions are to be attributed to each person based on their percentage of ownership in the firm. Each person who has contributed in excess of \$200 since January 1 should be identified by name, address, occupation, name of employer, amount of contribution, and aggregate total on Schedule A. 11 CFR §110.1(k) Please amend your report by providing the omitted information.

-Schedule H4 discloses a disbursement(s) for admin/voter event(s) which appears to be using a ratio(s) inconsistent with those disclosed on Schedule H1. Please amend your report to clarify this apparent discrepancy.

NEW YORK STATE DEMOCRATIC COMMITTEE  
PAGE 3

-Schedule D discloses that the debt(s) owed to AT&T and Wade Tours apparently has been settled. Please note that Commission regulations (11 CFR Part 116) control the settlement of debts between political committees and their creditors. You should be aware that only terminating committees are permitted to settle debts. However, ongoing committees may request a determination from the Commission that a debt is not payable. 11 CFR §116.2(b)

If your committee is terminating, you must complete the enclosed Debt Settlement Plan (FEC FORM 8).

If your committee is ongoing, you may submit a request to the Commission which explains the circumstances, in detail, surrounding a debt(s) which you consider as not payable.

In either case, you must continue to report the debt(s) until you have been notified of the Commission's approval of your debt settlement plan or request. 11 CFR §104.11

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 219-3580.

Sincerely,

  
J.P. Amodeo  
Reports Analyst  
Reports Analysis Division

# DEBT SETTLEMENT PLAN

NAME OF COMMITTEE	
ADDRESS	
CITY, STATE AND ZIP CODE	FEC ID. NUMBER

## PART I — COMMITTEE SUMMARY INFORMATION

1. CASH ON HAND AS OF _____	6. TOTAL AMOUNT OF DEBTS OWED BY THE COMMITTEE
2. TOTAL ASSETS TO BE LIQUIDATED	7. TOTAL NUMBER OF CREDITORS OWED
3. TOTAL (ADD 1 AND 2)	8. NUMBER OF CREDITORS IN PART 2 OF THIS PLAN
4. YEAR TO DATE RECEIPTS	9. TOTAL AMOUNT OF DEBTS OWED TO THE CREDITORS IN PART II OF THIS PLAN
5. YEAR TO DATE DISBURSEMENTS	10. TOTAL AMOUNT TO BE PAID TO CREDITORS IN PART II OF THIS PLAN

11. IS THE COMMITTEE TERMINATING ITS ACTIVITIES?

☐ YES ☐ NO

IF YES, WHEN DOES THE COMMITTEE EXPECT TO FILE A TERMINATION REPORT? IF NO, COMMITTEE IS NOT ELIGIBLE TO FILE A DEBT SETTLEMENT PLAN (SEE INSTRUCTIONS).

12. IF THIS IS AN AUTHORIZED COMMITTEE, DOES THE CANDIDATE HAVE OTHER AUTHORIZED COMMITTEES?

☐ YES ☐ NO

IF YES, LIST BELOW.

13. DOES THE COMMITTEE HAVE SUFFICIENT FUNDS TO PAY THE TOTAL AMOUNT INDICATED IN THIS PLAN?

☐ YES ☐ NO

IF NO, WHAT STEPS WILL BE TAKEN TO OBTAIN THE FUNDS?

14. HAS THE COMMITTEE FILED PREVIOUS DEBT SETTLEMENT PLANS?

☐ YES ☐ NO

15. AFTER DISPOSING OF ALL THE COMMITTEE'S DEBTS AND OBLIGATIONS, WILL THERE BE ANY RESIDUAL FUNDS?

☐ YES ☐ NO

IF YES, HOW WILL THE FUNDS BE DISBURSED?

I certify, to the best of my knowledge, that the information contained in this Debt Settlement Plan is true, correct and complete.

SIGNATURE OF  
TREASURER OF  
COMMITTEE

DATE

**FEC FORM 8**  
Effective 1-1-90

# DEBT SETTLEMENT PLAN

## PART II

NAME OF COMMITTEE	FEC I.D. NUMBER	PAGE	OF
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### CREDITOR SUMMARY INFORMATION (FILL OUT FOR EACH CREDITOR IN PLAN)

FULL NAME AND MAILING ADDRESS OF CREDITOR	DATE INCURRED	AMOUNT OWED TO CREDITOR	AMOUNT OFFERED IN SETTLEMENT

TYPE OF CREDITOR:

☐ INCORPORATED COMMERCIAL VENDOR    ☐ UNINCORPORATED COMMERCIAL VENDOR    ☐ CANDIDATE    ☐ COMMITTEE EMPLOYEE    ☐ OTHER INDIVIDUAL

A. TERMS OF THE INITIAL EXTENSION OF CREDIT AND NATURE OF THE DEBT

B. EFFORTS MADE BY THE COMMITTEE TO PAY THE DEBT

C. STEPS TAKEN BY THE CREDITOR TO COLLECT THE DEBT

### CREDITOR SECTION (TO BE FILLED OUT BY CREDITOR)

D. WAS THE EFFORT MADE BY THE CREDITOR TO COLLECT THE DEBT SIMILAR TO OTHER DEBT COLLECTION EFFORTS AGAINST NONPOLITICAL DEBTORS?

☐ YES    ☐ NO    IF NO, PLEASE EXPLAIN

E. ARE THE TERMS OF THE DEBT SETTLEMENT COMPARABLE TO OTHER SETTLEMENTS MADE BY THE CREDITOR WITH OTHER NONPOLITICAL DEBTORS?

☐ YES    ☐ NO    IF NO, PLEASE EXPLAIN

*As a representative of the creditor, I hereby accept the settlement offer made to me by the committee and upon payment agree to consider the debt satisfied (or attach a copy of the signed settlement).*

SIGNATURE OF  
CREDITOR OR  
REPRESENTATIVE

DATE

# DEBT SETTLEMENT PLAN

## PART III

NAME OF COMMITTEE	FEC ID. NUMBER	PAGE	OF
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### LIST REMAINING DEBTS

A. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
<p>TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL</p> <p>IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>		
<p>B. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR</p> <p>TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL</p> <p>IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
<p>C. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR</p> <p>TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL</p> <p>IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
<p>D. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR</p> <p>TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL</p> <p>IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER
<p>E. FULL NAME, MAILING ADDRESS AND ZIP CODE OF CREDITOR</p> <p>TYPE OF CREDITOR: <input type="checkbox"/> INCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> UNINCORPORATED COMMERCIAL VENDOR <input type="checkbox"/> CANDIDATE</p> <p><input type="checkbox"/> COMMITTEE EMPLOYEE <input type="checkbox"/> OTHER INDIVIDUAL</p> <p>IS THIS A DISPUTED DEBT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	AMOUNT OWED TO CREDITOR	AMOUNT EXPECTED TO PAY/OFFER

DOES THE COMMITTEE HAVE SUFFICIENT FUNDS TO PAY THE REMAINING AMOUNTS TO BE PAID OR OFFERED?

☐ YES ☐ NO IF NO, WHAT STEPS WILL BE TAKEN TO OBTAIN THE FUNDS?

